PROCEEDINGS OF THE BOARD OF HEALTH MEETING TUESDAY, March 8, 2016 5:00 PM

Present: Jay Tibbetts, Joe Van Deurzen, Harold Pfotenhauer, Richard Schadewald, Karen Sanchez, Susan

Paulus Smith, James Crawford

Staff Present: Rob Gollman, Ann Steinberger, Patti Zich (minutes recorder)

1. Call to Order, Welcome, and Introductions

Jay Tibbetts called the meeting to order. Jay Tibbetts indicated Chua was sick and was not at the meeting. Jay Tibbetts indicated James Crawford was a new member and asked him to tell the Board about himself.

James Crawford indicated he is retired civil and environmental engineer. Jim has worked as a medical technologist in hospital labs, waste water treatment sludges, waste water treatment plants, hazardous waste sites. He has earned B.S. degrees in Life Science, Soil Science and Engineering. After graduation he moved to Shirley to work for Foth and Van Dyke. His clients were waste water plants, landfills and hospital infection waste disposal studies. He was hired by the DNR as their pollution control engineer in Green Bay and he worked there for 20 years before retiring. He regulated pollution sources like factories, rendering plants, and power plants. He took them to DOJ when necessary, wrote air permits and he wrote some state codes. He is married to Carol for 28 years and she is also an engineer with DNR. They live on a farm in rural Brown County three miles from the wind turbines with no symptoms and happy. He is honored to be appointed to the Board and his main interests are to improve mental health care in the County and to help resolve the distress of his neighbors with these wind turbines.

Harold Pfotenhauer states he is a funeral director. Harold served in the US Air Force during the Korean War. After serving in the US Air Force, Mr. Pfotenhauer worked for a funeral director for four years. He earned a degree at Northern Michigan University School of Management. He worked in the banking field for a number of years and then decided to become a funeral director. He went to Chicago and worked in Cook County morgue. He was 40 years old and went back to school and finished up mortuary school, got his license, and built a funeral home. He also obtained a scholarship to the funeral management school in Chicago. Harold states he is very honored to protect the health of the people in Brown County.

Joe VanDeurzen is presently employed as a commercial real estate agent and trying to retire. He has owned restaurants, managed school bus companies, was an officer, and a sailor. He has been on the County Board for 6 years as an elected official and has been on the Board of Health for 10 years.

Jay Tibbetts is a semi-retired physician, a GP. He retired from West Side Clinic Prevea in 1998. Since then he has worked as a volunteer physician at the free clinic. As far as his tenure with the Board of Health it begins with an appointment from then Mayor Sam Halloin in 1975. He is happy to continue to serve.

Richard Schadewald is a retired social studies teacher from Bay Port. He has been on the County Board 18 years. He was appointed to the Board of Health in October 2014.

Susan Paulus-Smith has a degree in Chemistry and she worked at DuPont and in the packaging industry. She went to graduate school for a short time. Then she went back and obtained her BSN degree here in Wisconsin. She is getting her graduate degree in May. She has also studied Spanish at the graduate level as well.

Karen Sanchez is a family nurse practitioner and she works for NEW Community Clinic, primarily healthcare for the homeless. She was appointed one year ago.

2. Approval / Modification of the Agenda

MOTION: To approve the agenda as presented.

Schadewald / Pfotenhauer

MOTION: To remove agenda item no. 10 in regard to the PowerPoint presentation by Chua Xiong due to redundancy and post it on the Health Department website for those who have not had the opportunity to review and approve agenda as amended.

Schadewald / Van Deurzen

MOTION CARRIED

3. Approval of Minutes of meetings of December 15, 2015 and January 12, 2016

MOTION: To approve the minutes from December 15, 2015 Van Deurzen / Schadewald

MOTION CARRIED

MOTION: To approve the minutes from January 12, 2016 Schadewald / Van Deurzen

Corrections were made to the minutes from January 12, 2016.

MOTION: To approve the January 12, 2016 as amended. Schadewald / Van Deurzen

MOTION CARRIED

Joe Van Deurzen would like the minutes to return to summary form and indicated that if anyone needed verbatim minutes that a recording was available for review. Dr. Tibbetts indicated that they all agree.

4. Comments from the public.

Sandy Johnson, 1893 Wayside Road, Greenleaf, WI, gave James Crawford the audio recordings of Chua's two statements given at the podium on December 15, 2015. Sandy feels it is very important that anyone reviewing the document have good training in physics. She states that Jim Crawford has three BS degrees and states he is qualified to take a look at the evidence and make decisions as well as Bill Acker. She indicates her sister got her nursing degree from Marshfield when they had three year programs. She never had physics. She didn't have it in high school. She didn't have it for her RN degree. Sandy wondered if Chua had training in physics because acoustic energy and electrical generation is physics. Sandy states she went home and after hearing Ms. Xiong say she didn't see any evidence, there wasn't enough science, she will look at annually, it might take her 5 years or 10 years but she would get to the bottom of it and Sandy stated that these people don't have 5 years. Sandy states that Core Director Jeanne Hewitt's website has a statement that she has her Ph.D. and is Director in Community Outreach and Engagement Core. She stated that the website states "For example, we are working with a number of community partners to address 'noise on Milwaukee's near north side in the Lisbon Avenue Neighborhood. Noise as an environmental public health issue was brought to our attention by a local business owners. Key partners in this initiative are youth at Our Next Generation (ONG), bio-engineer and community noise specialist, Mr. Gonzalo Sanchez (President of Sanchez Industrial Design, Inc., Middleton, WI), and Center senior scientist, Dr. Daniel Weber. The COEC team facilitates this initiative, which includes the youth's preparation for a forthcoming community forum that the engaged students and youth will hold (with our assistance.)" She found it interesting that the big thing they are focusing on is some businessman contacted their group and said we think the noise from some plant industry on this road is making kids sick. She called one of the pediatricians but never got a call back. She wanted to warn them to look into ILFN because these problems are not just with industrial wind turbines. Sandy gave the Board of Health members an article from www.rbs2.com/utiltity.pdf and asked "what is the liability in terms of if and when things can be causal and proven?" She states the State of Wisconsin per the Supreme Court holds the utility legally liable for the byproducts of electrical generation.

Jim Vanden Boogart, 7463 Holly-Mor Road. Jim wanted to address the five chosen documents that Chua used in her Power Point presentation. Jim states the Wisconsin Wind Siting Council Report, 2014, fails to meet the criteria that were used to include or exclude documents. One of those was Journal Impact Factor. He states it was never published in a journal so there is no impact factor. In regard to the peer review process, it was never peer reviewed. In regard to author credentials, there is no one on the Wind Siting Council that is PH.D. or a medical doctor or has any significant credentials. There is one person who is a doctor of dentistry so we have one medically trained person who had to go through medical school and he was in the minority group. In regard to authors' publications, no one on the Wind Siting Council really has any publications. In regard to author affiliations, the only affiliations that are significant and noteworthy are the fact that we have wind

developers on the Wind Siting Council. He states we have an environmental organization that there are basically no credentials in terms of author affiliations. In regard to research methods, there was no research done at all and that it was a literature review. Jim states that in terms of the criteria that was supposed to be used, it failed all these criteria. The makeup of the Wind Siting Council here is another reason why it should be disqualified. The makeup was appointed by statute. It wasn't appointed by selection of appropriate people. By statute, two of the members are wind developers who make all of their income from building wind turbine projects. They are doing a health review on the wind turbines. Two of them are executives from wind energy organizations or from utilities. One is from WE Energies, Andy Hesselbach and the other one was Dan Ebert from WPPI Energies, two members who build and operate the wind turbine projects. There are two environmental group members who received direct or indirect funding from the wind industry and whose agenda is promotion of wind energy. There are 6 which are considered the minority group out of 15. Minority means 43% of the entire counsel. The minority group was of the very strong dissenting opinion opposing the report, concluding the only one who had medical training who was the lead author of that dissenting opinion including the chairman of the counsel. Jim's final point was one of the members who wrote that report is Mr. William Rakocy, principal partner of Emerging Energies and the man who built Shirley Wind.

Dr. Tibbetts added of those members the physician member has never been filled. James Vanden Boogart said it was supposed to be one faculty member of the University of Wisconsin system with expertise regarding the health impacts of wind energy systems. That seat has been absent for many years.

William Acker, 3217 Nicolet Drive, Green Bay, WI. Bill submitted a document called "Large endolymphatic potentials from low-frequency and infrasonic tones in the guinea pig." He has mentioned numerous times the importance of this document that was carried out by Professor Alec Salt, an otolaryngologist along with four other otolaryngologists. This document was not cited in any of Chua's work so he wanted to make sure this got into the record. In this study Professor Alec Salt was able to show that when the guinea pigs were exposed to low infrasound that they were annoyed. They had sensors on their brains and the sensors showed that the noise irritated them. He states this is one of the best documents he has seen as far as very in-depth analysis of the workings of the inner ear and how this whole process works. The other document Bill submitted was a document that was conducted in Japan on 15 wind turbines technicians. Basically, they exposed wind turbine technicians to different types of noise including infrasound and then their brain activity was monitored with an EEG to see if and how the noise affected them. Bill states it showed the other types of noise had no impact on their brain activity but the infrasound noise did have a negative impact. It did show that they were annoyed. It showed they had trouble concentrating during that exposure of the noise.

Bill gave the Board of Health a report he prepared in response to Chua's report. Bill states Chua used journal impact factor as a means of determining which documents were good and which documents were not good. He states journal impact factor was never intended to be that type of device. The purpose of journal impact factor is it was intended for librarians to help them make decisions on which journals they should purchase for the research libraries they represent. The problem with that process is the journals are set up in different divisions. If you are going to compare impact factors you should compare two journals that are in the same division. He states one of the reasons it is so important is because some journals in certain divisions will have a very high impact number. Professors and scientists are complaining about this journal impact factor because some journals have been caught pushing their numbers higher by asking the authors that are submitting articles to their magazines to include more references at the end of the article so they can increase the number of citations which then increases the impact factor.

Bill also states two of the documents she (Chua) favored were not peer reviewed. In this process you cannot have that because when they are not peer reviewed the people are allowed to say anything they need to say. This is why peer review process is so important.

Ben Schauer, 6225 Highview Road, Denmark, WI. Ben gave the Board of Health members a letter dated February 18, 2016 which refutes a couple of claims that another person living in his township made. Ben and his wife offered to swap homes for 6 months so then the Board can see for themselves and make their own unbiased opinion on what they feel the impacts are.

Barb Vanden Boogart, Morrison Wisconsin. Barb states in the Keith Stelling document, which is one Ms. Xiong reviewed, one of the documents that Ms. Xiong reviewed and contained in the Keith Stelling document which you all have lists how NASA has done approximately 10 years of study. NASA has come to the conclusion that

wind turbines emit ILFN. The governmental branch of the armed forces, the Navy, has researched what the nausogenisity range is of ILFN. That is detected within numerous homes in the Shirley wind project. She states you have all the studies all the worldwide experts that have submitted documents. You have the sworn complaints and affidavits which are legal evidence. Barb states if it were Flint Michigan and you had these emissions of the toxins into the water and you test the water coming out of the person's faucet and it is consistent with toxic levels and those people are displaying the symptoms of being ill, consistent with being close to those toxins, you stop it. She asked what was the difference except a lack of desire to move forward to protect them by whoever can make that decision. She states we have an ordinance that says based on potential, this is beyond potential. Barb states Chua chose to review the Massachusetts report. She asked the Board of Health to review their documents as there are numerous expert rebuttals to that report.

Bill Meindl, 125 West Mission Road. Bill states that at the last Human Services Committee meeting, Supervisor Erik Hoyer showed a PowerPoint presentation showing how the Health Board, over the last half dozen years or so, has been increasingly spending time on the Shirley wind power project. He states there are other considerations for the Health Board and Health Department to consider. The point he would like to make is he encourages the members of the Health Board and people who attend these meetings, to discourage them and to not tolerate disparaging and derogatory statements about the Health Director Chua Xiong. The Chair of this Board and County supervisors and members of the public have made statements about Chua Xiong that she is irresponsible, her behavior is borderline criminal, that she has been involved in dereliction of duty and other derogatory remarks. He feels it is unprofessional, uncalled for, and is out of line and should not be accepted. He mostly attends City of Green Bay meetings but as time allows he attends Brown County meetings. He has never seen the County's Planning Director Chuck Lamine treated this way or the County Airport Director Tom Miller treated this way or the County's Solid Waste Director Dean Haen treated this way or anyone else for that matter. He wondered why should be any different for the Health Director. He states you can disagree but feels attacking her with derogatory statements is out of line and should not be acceptable. He states it almost to the point to where to some degree there is an adversarial relationship between the Board of Health and the Health Department Director and that should not be tolerated. That should not be the case and that is just way beyond what should be acceptable behavior.

5. Zika Presentation

Ann Steinberger handed out information regarding the Zika virus. She is the nurse manager with communicable disease and adult health unit. As you know and have heard in the media the Zika virus has come to our attention. It is a mosquito-borne infection that is an arbovirus disease closely related to dengue fever, Japanese encephalitis and West Nile viruses. As you know West Nile is also transmitted by mosquitoes however that is a different mosquito that what transmits the Zika virus. This virus was first detected in Uganda in 1947 in monkeys. We have had sporadic cases in Africa and Asia. In 2007 there was an outbreak in the Yap Island. Ann pointed out the geographical distribution of the Zika virus, starting off in Africa and moved over to the Yap Islands off Japan, then to French Polynesia and now to Central and South America and Mexico.

In an area where you are introducing a virus where a lot of people do not have immunity to, more people will become ill. Zika is transmitted by the Aedes species of mosquitoes. The United States does have the Aedes mosquitoes. Mr. Schadewald asked about Wisconsin and Ann indicated Wisconsin did not. There is one mosquito the Aedes Aegyptus is the most efficient vector for this virus transmission and this is in more of the southern United States, like Florida and Georgia area. There is also another mosquito that possibly could be a vector for the Zika virus which is the Aedes albopictus. This mosquito goes as far north as Illinois.

Other modes of transmission of the Zika virus can be through the intrauterine and perinatal transmission, sexual transmission, laboratory exposure and blood transfusion.

Mr. Schadewald asked if Wisconsin's mosquitoes won't spread it or just currently don't. Ann stated the mosquitos that we have in Wisconsin are not the species of mosquitoes that typically are known to transmit this virus. Mr. Schadewald wanted to know if they could become a species that does. The Division of Health and UW Madison are working together doing surveillance of mosquitoes in Southern Wisconsin and to monitor for the Aedes mosquitoes. Any individuals with the Zika virus are encouraged during the first week of illness to avoid mosquito exposure because we don't want to introduce the Zika virus to our species of mosquitoes.

Currently there is no known transmission of the Zika virus in the United States. All of the cases identified are travel associated. Once infected, a person will have lifetime protective antibodies and the best form of

prevention is protection against mosquito bites. They are aggressive and day time biters so we encourage no standing water and use insect repellent. The Zika virus is relatively mild, 4 out of 5 people that are infected don't even know they have the disease. The people that are symptomatic usually have mild symptoms like fever, rash, joint pain, red eyes, muscle aches and headache. Mainly if they are ill it is supportive care, plenty of bed rest and drink lots of fluids. They are still investigating the link between Guillain-Barre syndrome (GBS) and the Zika virus. There have been reports after the Zika virus infection more people have had Gillian-Barre. That link is still being investigated by the World Health Organization and the CDC.

Microcephaly – where you have small heads of infants born to mothers who have the Zika virus. This is reported more with the outbreak of the Zika virus however that link is still being investigated. The CDC recommended any pregnant woman in any trimester should avoid traveling to areas where Zika virus transmission is ongoing. We are testing for Zika in the United States and here in Wisconsin. The symptoms of Zika virus infection are similar to dengue and chikungunya, we recommend testing for all three. Currently, there are no commercially available tests. Testing is performed at the CDC through assistance from the Wisconsin State Laboratory of Hygiene (WSLH). Anyone tested for Zika virus and if it's a fee exempt has to be approved by the DHS Vector borne Epidemiologist. If they are not available we can approve that testing too. We test people who have history of travel to Zika virus affected areas within 2 weeks from illness onset, and at least two signs and symptoms. We also test asymptomatic pregnant patients with a history of travel to Zika virus affected areas. This testing is performed within 2-12 weeks after travel. We are monitoring 16 people in Brown County that we have sent in specimens for the Zika virus.

Zika virus and breastfeeding - The Zika virus has been detected in breast milk however; there have been no cases of Zika transmission associated with breastfeeding. We still encourage mothers to breastfeed their infants. The benefits of breastfeeding outweigh theoretical risks. At this time animals do not appear to be involved in the spread of Zika virus. Nonhuman primates, such as monkeys and apes, have shown the ability to become infected with Zika virus. Primary prevention measure is reducing mosquito exposure. Avoid exposure to mosquitoes. Use insect repellent. Eliminate standing water in/around home. Keep mosquitoes out of your home.

CDC released a health advisory 1/15/2016 about the emerging threat of Zika virus infections in travelers returning from Central America, South America, and Mexico. Local vector-borne transmission of Zika virus has not been documented or reported in the United States. Travel-associated Zika virus disease cases reported is 153. We are communicating with medical providers, infection control, partners in the hospitals, the clinics the current CDC and WI DHS guidelines and recommendations. Zika virus is a reportable infection and is investigated in Wisconsin as part of arbovirus surveillance. We are doing surveillance on all specimens submitted for testing from our County. We are utilizing social media, internet, display boards, fact sheets to promote mosquito prevention. The WI DHS and University of Wisconsin-Madison, Medical Entomology Laboratory are collaborating with mosquito surveillance for possible emerging Aedes species.

Another emerging concern is Elizabethkingia. The WI DHS is currently investigating an outbreak of bloodstream infection. The majority of the patients diagnosed are over the age of 65 and all have at least one underlying serious illness. At this time, there are 44 reported cases in Wisconsin. 18 people have died and it is not known if it is related to the Elizabethkingia or an underlying medical condition. The CDC is here in the State working with the Division of Health trying to find the source of this infection. The Bacteria is found the environment, typically does not impact humans. Various questions from the Board of Health members were answered by Ann Steinberger.

6. Environmental Division Update – Rob Gollman addressed his handout and thanked the Board for approving the reduced fee for the radon test kits. The promotion was successful. We sold 112 kits in the months of January and February which was 19 more than we did all of last year. Of those 112 sold, so far 49 have been submitted for testing. Of those results reported, 21 have shown elevated levels at 4 picocuries or above and we have advised retesting. Many of those individuals came back and purchased another kit. Dr. Tibbetts asked about distribution. Rob indicated they did mapping and there was no pattern to distribution. They are scattered across the county. Joe Van Deurzen asked what the shelf life was on a radon kit. Rob indicated as long as the packaging remains intact it is indefinite. It is activated carbon inside and double sealed. We have had kits used which were several years old and reporting accurately. Nothing has come back from the company stating there are any issues. Joe Van Deurzen asked about other opportunities to sell these kits. Rob indicated we have a couple of events in the future with our lead coalition at which we can promote them.

Several members of the Board of Health offered ideas to promote selling the kits. Rob indicated he had some other ideas as well for the future.

Rob indicated at the February 24, 2016, Human Services Committee meeting there was a communication from Supervisor Zima expressing concern regarding our additional tavern license fee which is \$37.00 for additional tavern areas. Rob explained we instituted this fee back in 2009 because we were seeing an increase in additional bar areas being built in establishments. An additional bar area has all the accourtements that require inspection and costs our staff extra time. The division is 100% fee funded on the licensing side so we felt it appropriate. The fee is currently \$37 and it has been raised \$1 in the last 5 years. We thought this was the most equitable way to assess added cost and charge those who require the additional time. For instance, a large banquet facility may have three separate banquet halls and each will have a full service bar and that requires a lot of time. The fiscal impact for our division would be \$3,200 for additional tavern area fees.

Rob indicates he just finished the annual report numbers for 2015 which is in the provided handout. Rob states we are fully staffed and hopes to see an upward trend on inspection numbers if we can retain staff.

Rob indicates odor complaints are down as we have received 6 this year, of those two were verified. One was from a source we could not determine.

James Crawford asked about beach monitoring and Rob indicated we used to be part of this but funding from the State and DNR dried up so we were not able to continue the program. The numbers on the report are for two contracts for water testing of natural bodies of water; one is at Ashwaubomay Park and the other is from the DNR to do some testing of water collected in the area of concern in Green Bay.

7. Correspondences - Jay Tibbetts has a letter from Dave Enz.

MOTION: To receive and place on file correspondence received.

Schadewald / Van Deurzen

MOTION CARRIED

Jay Tibbetts indicates he did send emails from Rick James, Steve Cooper, Steve Ambrose, Robert Rand and Jerry Punch. All of these things are considered public documents that have been sent to all the members of the Board of Health, Chua, Corporation Counsel and Doug Schneider.

8. Communication

a. Board of Supervisor meeting January 17, 2016 regarding increasing Board membership from 7 to 9

Jay Tibbetts indicates the state statute allows for a maximum of 9. He could not find any information on what the minimum was. No more than three can be elected positions. They request a good faith effort to get an RN and a MD on the Board. Jay Tibbetts thinks the suggestion for the increase came from the County Board thinking it would be helpful to tackle some of the issues especially the wind stuff but he is not sure. Jay Tibbetts questioned would be easier or more difficult to find a quorum with the increase in numbers. Jay Tibbetts thinks the Board has always been at this number and he thinks it has worked very efficiently. Richard Schadewald indicated be believes the intent was that if we are going to have a serious discussions on wind turbines, it would be very hard for a single county board supervisor to explain to the other 25. If there was another county board supervisor, or two more, then it becomes part of the general discussion. Mr. Schadewald indicates it was meant to enhance the communication and the knowledge or awareness of what was going on. He believes the only reason they said 7 to 9 was because Corporation Counsel indicated you could raise it to 9. Rick thinks it might be a little better because he doesn't want to take an RN or medical doctor off the board to get more county board supervisors. He wanted to get more county board supervisors part of this discussion because he feels it is an important issue; although they can come to the meetings. Dr. Tibbetts did seem to think it was a suggestion. He thinks it was sent initially to Human Services and they sent it to Board of Health and he thinks we need to discuss this and take a stand and then send it back to Human Services with our recommendation.

Richard Schadewald's opinion is you can leave at 7 or increase to 9 so you have an advantage to get another county supervisor on the County Board to be part of the discussion.

Harold Pfotenhauer favors a smaller board because there is more continuity with smaller boards. He states there are always egos working together and that can create more problems than you want. So on the basis of his experience he prefers 7 members.

Joe Van Deurzen would like to keep the politics out of this. He indicates we have one political representative to convey our information to the County Board and Mr. Schadewald does a great job. Politicians have to work for their constituents and could therefore be influenced by them. He prefers it at 7 as well.

Karen Sanchez agrees with Harold and Joe. By keeping it at 7, it is more efficient and the politics concern her too.

Susan Paulus-Smith agrees that having more county board members would, to some degree, connect us more to the County Board but she questions whether they need to be able to vote. Do you need two supervisors to vote which is kind of the political piece of it. Mr. Schadewald indicated he was not thinking about the voting. Susan agrees with the continuity piece and that it is a big job for Mr. Schadewald. Mr. Schadewald indicates people are coming to talk at County Board meetings, which is educating them as well.

Jim Crawford thinks small boards work better. If you get larger you have fewer people talking. What he senses is there is a concern, we are saying the wind turbines are a health hazard and the director is saying they are not. I am a little disappointed with the relations and maybe she is not as supported as she needs to be. He is fine with 7 because he likes smaller boards as well.

MOTION: To recommend that the Board of Health membership count stays at 7 members and does not increase to 9 members.

Pfotenhauer / Van Deurzen

MOTION CARRIED

9. Director's Report

No Director report.

10. PowerPoint Presentation as per 1/27/16 Human Services Committee meeting by Health Director Chua Xiong and her decision regarding the IWTs at Shirley Wind.

Removed from agenda under Item No. 2.

11. All Other Business Authorized by Law

Jim Crawford wants to move the wind turbine issue in a certain direction. He read December through the latest minutes and they are extensive. He has read the blue book and feels there is a lot of good stuff to glue this theory together on how wind turbines are affecting humans. He asks, what kind of action do we want to take? He goes back to what code are we dealing with if we call it a hazard. He wants to go through his thought process and figure out where we might want to go to relieve this issue. Step one is read the County Code Chapter 138. It says "what is a health hazard." It "means a substance, activity or condition that is known to have the potential to cause acute or chronic illness or death if exposure to the substance, activity or condition is not abated." What is known? Jim gives this idea. You would call e coli on a beach a health hazard because it is known that other products, excretion, typhus or cholera or other deadly germs. He states if you find e coli on a beach you have the potential to have a health hazard because it is known what the association is. He thinks that to be known you have to be certain. You have to have some proof. He thinks what we have here is what he will call "Theory A." You have to admit it is not a proven fact yet and that needs to happen. He believes Chua did a great job in reviewing and arriving at her conclusion about the association between wind turbines and a health hazard. She concluded it is not according to this definition and he thinks she reached the right conclusion. The correct conclusion is that Theory A needs to be better proven before wind turbines are considered a health hazard. Those working with the anti-wind turbine group Theory A may scream it is a fact. But it is not. It is a theory. It is a theory by association and draws on local case reports, the detection of infrasound and a few far flung studies that occurred elsewhere that support the theory. That is how you glue a theory together. It is logical. Case reports have value but primarily in generating theories. To test the hypothesis a study must be done that demonstrates infrasound sickens some humans as proposed. Not guinea pigs, humans. "If the human body is affected by low, sub-threshold sound levels, a unique and not yet discovered receptor mechanism of extraordinary sensitivity to sound is necessary." This statement was taken

from a Canadian study done in 2009 by three M.D.s and three Ph.D.'s. He states what they reviewed was what the Brown County Board of Health sort of based and put their money on, Dr. Nina Pierpont's book. This group found that it is lacking in medical reason and understanding. The vestibular theory is also indicated as impossible and he will give some of their reasons.

James states that what they say is that all things in our body produce sound. When we inhale, the sucking in of air creates a low pressure zone. When you exhale you are creating a different pressure wave. The heart creates sound. The bowels create sound. We are creating sound constantly. James says that what these doctors say is this sound is what overrides any external infrasound coming to our bodies and that is their theory. There are counter theories to Theory A and that needs to be tested too. In fact, they give some counter theories of medical reasons that are producing these symptoms. Things like the nocebo effect, kind of the opposite of placebo. He continues they say that wind turbine activists can produce the nocebo effect. They also bring up somatoform disorders. Essentially it is stress disorders which are real and you can actually sense if a turbine is on or off according to the definitions in this description of the disease. The doctors say it is probably a like cause why people can detect turbines on or off. Basically the medical community has claims and counterclaims. They all have theories. The good news is that if it is one of these disorders causing these disease symptoms it is easily treated if their theory is correct. If theory A is correct you need to stop the turbines at night so people can sleep or reduce their hours of operation in some way. There is a big difference in consequence. In these two groups of theories he hopes that we can all agree that they have done a good job of gluing a theory together and they have some of the elements of science in it. He believes it now needs to go to the medical school. It needs to go to a lab and not just with acoustics. That is just a tiny part of this problem. He thinks the pro-wind turbine people would agree. They are acoustics. There is infrasound everywhere and the body deals with it. That is what Theory B says; you could be treated easily for these symptoms. He agrees a study could take several years but he thinks it is important to meet our goals. The long term goal is what is the effect of wind turbines and how should Wisconsin adjust its setback rules so that no more big wind farms go close to people that causes a lot of sickness. That is ultimate goal in this. James states to do it, to get there, you have to stop sniping and you have to move forward on two things. One, we have to have someone go and investigate where should we get a study done. He suggests Madison's Medical School. Two, he thinks the second goal is we have to find immediate relief of these symptoms that were experienced. He thinks that could include what Theory B suggests they do. It could include moving out of the area and getting the utility to buy their home for the price before the wind turbines moved it. He believes the immediate thing is a legal action and it is not going to be by the County. This is not a health hazard legally. He thinks the individuals go get an attorney and start talking to Duke Energy. He also thinks the Town of Glenmore has a legal agreement with Duke Energy and if it is being violated, you have the grounds for good legal action. He wondered how can the County help. He thinks that the County can help by sending some of this payment money it is getting every year from Duke Energy, \$26,000 should be sent back in some legal way to the Town of Glenmore. The Town then can, if it is going to do its own lawsuit, it would certainly represent residents and bring relief, whatever that would be. It could be stopping the turbines at night time hours. He thinks that sort of legal action has to happen. It shouldn't have taken 5 years, because actually this sort of theory might be used against you. He states the Board of Health is an advisory board. Jim would like a future agenda item to discuss moving forward with the County Board on the wind turbines.

12. Adjournment / Next Meeting Schedule

MOTION: To adjourn meeting

Schadewald / Van Deurzen

MOTION CARRIED

NEXT MEETING: May 10, 2016 5:00 PM